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APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\*** *JA*  
 This application is a CIP of 09/168,303 10/07/1998 ABN  
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**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *JA* *N/A*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 11	TOTAL CLAIMS 50	INDEPENDENT CLAIMS 13
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>JA</i> Initials				

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TITLE  
 PEPTIDES USEFUL FOR REDUCING SYMPTOMS OF TOXIC SHOCK SYNDROME AND SEPTIC SHOCK

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of
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